



## Arizona Medical Board

9545 East Doubletree Ranch Road • Scottsdale, Arizona 85258

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### DRAFT MINUTES FOR TELECONFERENCE OF GUIDELINE DEVELOPMENT SUBCOMMITTEE

Held on Wednesday, August 8, 2007

9535 E. Doubletree Ranch Road • Scottsdale, Arizona

#### *Subcommittee Members*

Douglas D. Lee, M.D., Chairman

Robert P. Goldfarb, M.D., F.A.C.S.

Patricia R.J. Griffen

Todd A. Lefkowitz, M.D.

Lorraine L. Mackstaller, M.D.

Germaine Proulx

#### **CALL TO ORDER**

The meeting was called to order at 1:15 pm

#### **ROLL CALL**

The following Subcommittee members were present: Douglas D. Lee, M.D., Robert P. Goldfarb, M.D., Patricia R.J. Griffen, Todd A. Lefkowitz, M.D., Lorraine L. Mackstaller, M.D., and Germaine Proulx.

#### **CALL TO PUBLIC**

There was no one to speak during the call to public.

#### **NON-TIME SPECIFIC ITEMS**

##### **I. Approval of Minutes**

Guideline Development Subcommittee July 12, 2007 Meeting Minutes

**MOTION:** Dr. Goldfarb moved to approve the August 8, 2007 Meeting Minutes.

**SECONDED:** Ms. Proulx

**VOTE:** 6-yay, 0-nay, 0-abstain, 0-recuse, 0-absent

**MOTION PASSED.**

##### **II. Draft Complementary and Alternative Medicine Guidelines**

Dr. Lee requested the Subcommittee review the draft Complementary and Alternative Medicine (CAM) Guidelines proposed by Timothy C. Miller, J.D., Executive Director; along with the American Medical Association (AMA) Resolution; and the Federation of State Medical Boards (FSMB) Model Guidelines. Mr. Miller noted the use of CAM is increasing locally and nationally and the Board is experiencing an increase in the number of complaints against practitioners using CAM. He stated that during the 2005 Legislative session, the Board of Homeopathic Medical Examiners was granted a two year reprieve after undergoing a sunset review and, as a result, it became obvious the Board would need to take a position on the use of CAM by allopathic physicians. Mr. Miller stated that the FSMB Model Guidelines and the National Center for Complementary and Alternative Medicine were the source for his proposed guidelines.

Mr. Miller stated the Board is looking at two distinct issues. First, licensed allopathic physicians must meet the duties and responsibilities of an allopathic physician when diagnosing, treating, and monitoring a patient regardless of the intended treatment modality. In addition, a physician can use CAM as long as it is done in a way that still meets the patient's needs, meets the standard of care and is consistent with the guidelines. Dr. Lee questioned how close the AMB draft follows the FSMB guidelines. Mr. Miller stated although it tracks very closely, there were areas where the

FSMB uses bullet points and the AMB draft spells things out and it is organized somewhat differently than the FSMB guidelines. The Subcommittee agreed to use Mr. Miller's draft as the basis for their discussions.

Mr. Miller stated that the diagnosing and monitoring of the patient has to meet the allopathic standard of care and the same would apply to the use of CAM. He stated the physician needs to be able to identify if the use of CAM fails and develop an alternative treatment modality. Mr. Miller stated physicians must always obtain a patient's informed consent before treating the patient whether using conventional medicine, CAM or an experimental method. He also stated that unlike traditional allopathic treatment, a physician using CAM will need to always document appropriate consent and abide by the consent. The physician must provide the patient with all known risks and benefits regarding their treatment options, including no treatment, early termination of treatment and options regarding treatment facilities. The physician must also explain possible conventional treatment and must inform the patient if the treatment is not scientifically established using convention methods. Mr. Miller stated a physician may refer patients to a CAM practitioner for evaluation and treatment; however, the referring physician remains responsible for monitoring the results from the referral. Mr. Miller also stated when it comes to advertising or consulting with a patient, a physician cannot make false claims. Mr. Miller stated the real issue is whether it is appropriate for allopathic physicians to use CAM if there is little or no evidence the CAM will work. He stated in essence, the use of CAM is not a violation of the medical practice act, but allopathic physicians must integrate it safely and effectively.

Dr. Goldfarb suggested changing the Preamble, third sentence stating "reasonably likely" to "scientifically based." Dr. Goldfarb also suggested adding to the last paragraph "based on each particular case." Dr. Goldfarb also requested under Conclusion, first paragraph that the last sentence be deleted.

### **III. Future Guideline Development**

Dr. Lee suggested the Subcommittee adopt the draft proposed by Mr. Miller and then modify it accordingly. Dr. Mackstaller stated the draft is not ready to adopt as the final document.

**MOTION: Dr. Goldfarb motioned moved that the Subcommittee adopt the draft guidelines as a template.**

**SECONDED: Dr. Mackstaller**

**VOTE: 6-yay, 0-nay, 0-abstain, 0-recuse, 0-absent**

**MOTION PASSED.**

Dr. Lee requested that Subcommittee members email their proposed changes to the Executive Director.

The meeting adjourned at 1:40 pm.



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Timothy C. Miller, J.D., Executive Director